

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

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|---|---|--|---|---|---|--|---|---|--|---|---|--|---|---|--|---|---|---|---|---|---|---|---|---|---|--|--|
| NAME OF COMMITTEE (In Full) STRONG ECONOMY FOR MASSACHUSETTS INC | | FEC IDENTIFICATION NUMBER ▼ C C00526418 | | | | | | | | | | | | | | | | | | | | | | | | | |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report | | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>0</td><td>9</td><td></td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>0</td><td>5</td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>1</td><td>4</td><td></td><td></td></tr> </table> | | M | M | | 0 | 9 | | D | D | | 0 | 5 | | Y | Y | Y | Y | Y | Y | 2 | 0 | 1 | 4 | | |
| M | M | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| D | D | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 0 | 5 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Y | Y | Y | Y | Y | Y | | | | | | | | | | | | | | | | | | | | | | |
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|--|-------------------|--|---|---|---|--|---|---|--|---|---|--|---|---|--|---|---|---|---|---|---|---|---|---|---|--|--|
| Full Name of Payee Next Wave Communications, Inc | | Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>0</td><td>9</td><td></td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>0</td><td>5</td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>1</td><td>4</td><td></td><td></td></tr> </table> | | M | M | | 0 | 9 | | D | D | | 0 | 5 | | Y | Y | Y | Y | Y | Y | 2 | 0 | 1 | 4 | | |
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| Y | Y | Y | Y | Y | Y | | | | | | | | | | | | | | | | | | | | | | |
| 2 | 0 | 1 | 4 | | | | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 135 Professional Dr Ste 104 | | Amount 12065.40 | | | | | | | | | | | | | | | | | | | | | | | | | |
| City Ponte Vedra Beach | State FL | Zip Code 32082 | Transaction ID : SE.4225 | | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Expenditure Advertising | Category/ Type | Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>0</td><td>9</td><td></td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>0</td><td>5</td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>1</td><td>4</td><td></td><td></td></tr> </table> | | M | M | | 0 | 9 | | D | D | | 0 | 5 | | Y | Y | Y | Y | Y | Y | 2 | 0 | 1 | 4 | | |
| M | M | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 2 | 0 | 1 | 4 | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Federal Candidate RICHARD R. TISEI | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MA | | | | | | | | | | | | | | | | | | | | | | | | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | | | | | | | | | | | | | | | | | | | | | | | | | |

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|--|-------------------|--|---|---|---|--|---|---|--|---|---|--|---|---|--|---|---|---|---|---|---|---|---|---|---|--|--|
| Full Name of Payee Wilson Grand Communications | | Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>0</td><td>9</td><td></td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>0</td><td>5</td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>1</td><td>4</td><td></td><td></td></tr> </table> | | M | M | | 0 | 9 | | D | D | | 0 | 5 | | Y | Y | Y | Y | Y | Y | 2 | 0 | 1 | 4 | | |
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| 2 | 0 | 1 | 4 | | | | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 429 N Saint Asaph St | | Amount 5000.00 | | | | | | | | | | | | | | | | | | | | | | | | | |
| City Alexandria | State VA | Zip Code 22314 | Transaction ID : SE.4226 | | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Expenditure Advertising | Category/ Type | Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>0</td><td>9</td><td></td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>0</td><td>5</td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>1</td><td>4</td><td></td><td></td></tr> </table> | | M | M | | 0 | 9 | | D | D | | 0 | 5 | | Y | Y | Y | Y | Y | Y | 2 | 0 | 1 | 4 | | |
| M | M | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Y | Y | Y | Y | Y | Y | | | | | | | | | | | | | | | | | | | | | | |
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| | |
|---|----------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 17065.40 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | 17065.40 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ernesto DiGiambattista

[Electronically Filed]

Date

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|---|---|--|
| M | M | |
| 0 | 9 | |

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| D | D | |
| 0 | 5 | |

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| Y | Y | Y | Y | Y | Y |
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Signature